

OCT 10 2005

PTO/SB/21 (08-04)

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

3

Application Number	09/326,502
Filing Date	June 4, 1999
First Named Inventor	Stewart M. Kroll
Art Unit	1831
Examiner Name	Lori A. Clow
Attorney Docket Number	GSK173USA

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b)
Remarks Customer 00270		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	HOWSON AND HOWSON		
Signature	<i>Mary E. Bak</i>		
Printed name	Mary E. Bak		
Date	Oct 10, 2005	Reg. No.	31,215

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>Linda Woods</i>		
Typed or printed name	Linda Woods	Date	10-10-05

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PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	09/328,502
Filing Date	June 4, 1999
First Named Inventor	Stewart M. Kroll
Title	Patient-Specific Dosimetry
Art Unit	1831
Examiner Name	Lori A. Clow
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioner(s) associated with the Customer Number:

00270

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	9/25/05
Name	Stephen Venetianer	Telephone	
Title and Company	Vice President, Pharmaceuticals, SmithKline Beecham Corporation		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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OCT 10 2005

PTO/SB/96 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Stewart M. Kroll et al.Application No./Patent No.: 09/326,502 Filed/Issue Date: June 4, 1999Entitled: Patient-Specific DosimetrySmithKline Beecham Corporation, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Stewart M. Kroll To: Coulter Pharmaceutical, Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 010198, Frame 0929, or for which a copy thereof is attached.
2. From: Jeffrey A. Siegel To: Coulter Pharmaceutical Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 010198, Frame 0952, or for which a copy thereof is attached.
3. From: Coulter Pharmaceutical, Inc. and Corixa To: SmithKline Beecham Corporation
The document was recorded in the United States Patent and Trademark Office at Reel 015676, Frame 0588, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Stephen Venetianer

Signature

Printed or Typed Name

Vice President, Pharmaceuticals, SmithKline Beecham Corporation

Title

Date

Telephone Number

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